

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000088416

FILED
Feb 14, 2006
Secretary of State

Entity Name: ROCA DIAGNOSTIC LABORATORY, INC.

Current Principal Place of Business:

3380 SE LAKE WEIR RD
UNIT F
OCALA, FL 34471

New Principal Place of Business:

Current Mailing Address:

3380 SE LAKE WEIR RD
UNIT F
OCALA, FL 34471 US

New Mailing Address:

FEI Number: 59-3472941 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROJANO FIDES, MARIE S
3380 SE LAKE WIER RD. UNIT F
OCALA, FL 34471 US

Name and Address of New Registered Agent:

BANNER, JAMES
3157 N. UNIVERSITY DRIVE
SUITE 108
DAVIE, FL 33024 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JAMES BANNER

02/14/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: ST () Delete
Name: CASILE, ELLEN V
Address: 3380 SE LAKE WEIR RD
City-St-Zip: OCALA, FL 34471

Title: ST () Delete
Name: CASILE, BENJAMIN A
Address: 3380 SE LAKE WEIR RD
City-St-Zip: OCALA, FL 34471

Title: STS (X) Delete
Name: CASILE, ERNA
Address: 3380 SE LAKE WEIR RD
City-St-Zip: OCALA, FL 34471

Title: P (X) Delete
Name: ROJANO FIDES, M S
Address: 3380 SE LAKE WEIR RD
City-St-Zip: OCALA, FL 34471

Title: OM (X) Delete
Name: ROJANO, JOSE A
Address: 3380 SE LAKE WEIR RD
City-St-Zip: OCALA, FL 34471

Title: T (X) Delete
Name: ROJANO, LETICIA
Address: 3380 SE LAKE WEIR RD
City-St-Zip: OCALA, FL 34471

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BANNER, JAMES
Address: 3157 N. UNIVERSITY DRIVE, STE. 108
City-St-Zip: DAVIE, FL 33024

Title: S (X) Change () Addition
Name: TANNER, MARC
Address: 1000 S. OCEAN DRIVE, APT. 7L
City-St-Zip: POMPANO BEACH, FL 33069

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES BANNER

P

02/14/2006

Electronic Signature of Signing Officer or Director

Date